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CONFIRMATION NO. 3356

Bib Data Sheet

SERIAL NUMBER 10761,700	FILING DATE 01/20/2004 RULE	CLASS 089	GROUP ART UNIT 3641	ATTORNEY DOCKET NO. 11-0381C
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APPLICANTS

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** CONTINUING DATA ***** ⁵⁰¹
 This application is a CON of 07/068,051/06/29/1987 PAT D,300,135 *
 (*)Data provided by applicant is not consistent with PTO records ~~X~~
Data provided is correct, PTO records incorrect 

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 04/23/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 3	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	EXAMINER'S SIGNATURE 	INITIALS 11/9/04		

Verified and Acknowledged

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TITLE
 Infrared friend or foe identification system

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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